

<b>REQUEST FOR ORAL HEARING BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) 618728001US								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">In re Application of <div style="text-align: right;">Nelson et al.</div></td> </tr> <tr> <td style="padding: 2px;">Application Number 09/656,325-Conf. #9079</td> <td style="padding: 2px;">Filed September 6, 2000</td> </tr> <tr> <td colspan="2" style="padding: 2px;">For NETWORKED ELECTRONIC ORDINANCE SYSTEM</td> </tr> <tr> <td style="padding: 2px;">Art Unit 3641</td> <td style="padding: 2px;">Examiner T. Chambers</td> </tr> </table>			In re Application of <div style="text-align: right;">Nelson et al.</div>		Application Number 09/656,325-Conf. #9079	Filed September 6, 2000	For NETWORKED ELECTRONIC ORDINANCE SYSTEM		Art Unit 3641	Examiner T. Chambers
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<p>Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.</p> <p>The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) \$ <u>1,030.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by EFT Account SEA1PIRM is hereby authorized.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies or credit any overpayment to Deposit Account No. <u>50-2283</u>.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the</p> <p><input type="checkbox"/> applicant/inventor. _____ Signature</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) _____ Michael A. Oblon Typed or printed name</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>42,956</u> _____ May 29, 2008 Date</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ (202) 628-6600 Telephone number</p> <p><small>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</small></p>										
<p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>										

<p>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).</p> <p>Date: <u>5/29/08</u> Signature: <u>Peter Sher</u> (Peter Sher)</p>	
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